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CONFIRMATION NO. 9709

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.							
10/576,378	04/19/2006 RULE	720	2627	9694-000039/US/NP							
APPLICANTS Yukihiro Araki, Fujiidera-shi, JAPAN; Shingo Kage, Kobe-shi, JAPAN; Shinya Ogasawara, Yokohama-shi, JAPAN; Nobuyuki Miroku, Ikoma-shi, JAPAN; ** CONTINUING DATA ***** This application is a 371 of PCT/JP04/15380 10/18/2004 ** FOREIGN APPLICATIONS ***** JAPAN 2003-359779 10/20/2003 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/27/2006											
<table border="1"> <tr> <td> Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/TIANJIE CHEN/</u> <small>Examiner's Signature</small> </td> <td> <input type="checkbox"/> Met after Allowance <u>Initials</u> </td> <td> STATE OR COUNTRY JAPAN </td> <td> SHEETS DRAWINGS 12 </td> <td> TOTAL CLAIMS 5 </td> <td> INDEPENDENT CLAIMS 1 </td> </tr> </table>					Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/TIANJIE CHEN/</u> <small>Examiner's Signature</small>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	STATE OR COUNTRY JAPAN	SHEETS DRAWINGS 12	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1	
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ADDRESS GREGORY A. STOBBS 5445 CORPORATE DRIVE SUITE 400 TROY, MI 48098 UNITED STATES											
TITLE Disk apparatus											
FILING FEE RECEIVED 900	<table border="1"> <tr> <td rowspan="5"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: </td> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>				FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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